R E A C H I N G * F O R * S O L U T I O N S

A National Strategy Workshop Concerning the Sexual Abuse of Children

Ottawa, Ontario
May 28-31, 1989

WORKSHOP PROCEEDINGS AND SUMMARY

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REACHING FOR SOLUTIONS

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Introduction

The following report is a summary of the proceedings of the National Strategy Workshop Concerning the Sexual Abuse of Children: Reaching for Solutions, held in Ottawa, Ontario from May 28-31, 1989. More specifically, it is a summary of three sets of strategy group sessions (thirty-six group discussions) and four thematic issue group discussions on primary prevention, legal response, treatment and support, and native/aboriginal issues. This report does not include reports from focus group discussions, geographic/jurisdictional groups or the working group on structures and policies.

The Workshop was organized on a thematic basis with great emphasis upon small group process and productivity. This summary could not have been prepared without the extraordinary contribution of the following facilitators and chairpeople:

Strategy Group 1 : Linda Light/Bob Lutes
Strategy Group 2 : Rob Morris/Pat Dougan
Strategy Group 3 : Vicki Kelman/Judy Little/Peggy Mayes
Strategy Group 4 : Cathy Knox/Myra Lefkowitz
Strategy Group 5 : Katrine McKenzie/Eric Sigurdson
Strategy Group 6 : Shelley Rivkin/Barrie MacFarlane
Strategy Group 7 : Vaughen Dowie/Sylvia Pivko
Strategy Group 8 : David Wellings/Marcia Rioux
Strategy Group 9 : Heather Sproule/Susan Painter/Susan Nind
Strategy Group 10: Geoff Pawson/Gail Gould
Strategy Group 11: Beth Allan/Flora MacLeod
Strategy Group 12: Rob Croezen/Nora Farrell

Thematic Issue Groups:

Primary Prevention: Andy Wachtel/Norma McCormick
Legal Response: Nick Bala/Myra Lefkowitz
Treatment & Support Fred Mathews/Beth Allan
Native/Aboriginal: Pasqualina Iapaola/Sylvia Novik

Group Report Reviewers/Summarizers:

Sol Schuster/Kathy Stewart/Cynthia Devine/Louise Doyle

Strategy group sessions were held on primary prevention, legal response, and treatment and support. Each of the twelve groups was preassigned one strategic objective for discussion, then asked to rank the remaining and select two or three more to discuss. Objectives were selected according to different criteria at different times by different groups. Therefore it should not necessarily be interpreted that the most frequently discussed objective was the most important. Nonetheless, for information purposes, this report indicates which groups discussed which objectives.

It should also be noted that issues related to native/aboriginal communities were inter-woven throughout the strategy group sessions and are reported that way in this report. The thematic issue group report on native/aboriginal issues and the report from the NWT/Yukon group, however, are presented separately.

I. PRIMARY PREVENTION

A. ASSUMPTIONS AND PRINCIPLES

- The sexual abuse of children is symptomatic of a deeply-rooted disturbance in social values which tolerates and thereby promotes the misuse of power and authority against vulnerable populations, including children.

- The sexual abuse of children is a pervasive social problem which can only be reduced and ultimately eliminated through comprehensive social change resulting from community development strategies to redefine and recognize the role and potential value of all members of society, including children.

- Strategies for prevention of child sexual abuse must also incorporate provisions for the early identification of existing victims and offenders as well as those at high risk.

Comments from Strategy Group Discussions

° Other contributing factor to child sexual abuse seen to be the loss of a basic sprituality and increased emphasis on materialism

° Child-centred as opposed to family-centred approach is critical and should be made explicit

° Issues related to power and gender are inadequately addressed; appear to assume that child sexual abuse is an aberration in an otherwise okay system

° The eradication of child sexual abuse will require major social, political and economic change; concern that principles and assumptions take too narrow a view

° Guilty of "gender-laundering"; need to make clear that gender (male) is highest risk factor without precluding acknowlegement that, in different and limited numbers, women can also be sexual abusers

° Need to specify that "children" includes adolescents

° Recognize that our history includes oppression of people and manipulation of environment and people, as well as the more obvious expressions of sexism and racism

° Need to develop nurturing society rather than focus simply on families; we cannot tolerate any expression of violence over anyone with whom we share our environment

° The sexual abuse of children should be viewed as one of a range of problems arising from continued support of a patriarchal society

which supports oppression and violence

° Need to understand root causes of abusive behaviour and develop long-term strategies based upon that understanding

Suggested amendments:

° The sexual abuse of children is a result of deeply-rooted social values...

° The sexual abuse of children is symptomatic of deeply-rooted societal and patriarchal values...

° The sexual abuse of children is symptomatic of deeply-rooted problems/patterns in the social value systems which tolerate...

° The sexual abuse of children is symptomatic of a deeply-rooted history of social values...

° The sexual abuse of children is a pervasive social problem which can only be reduced and ultimately eliminated through comprehensive social change resulting from culturally-appropriate community development strategies...

° The sexual abuse of children is a pervasive social problem that can only be reduced and ultimately eliminated through governments initiating and enabling community development strategies...

Suggested additions:

° Governments will demonstrate on-going commitment to leadership related to the safety and welfare of children which will be expressed through funding of specific strategies to prevent child sexual abuse

° All initiatives to prevent child sexual abuse should be undertaken with a sensitivity to culture and a commitment to involving grass-roots/survivor constituencies

° Primary prevention is by its very nature comple. and multi-faceted and should be perceived as a continuum of coordinated efforts

° The sexual abuse of children is perpetuated by ignoring the prevalence of patriarchy in Canadian society which eroticizes powerlessness and permits many men to believe that they have the right to sexual gratification with or without consent

° The sexual abuse of children is not gender-nuetral: the majority of offenders are males; females do not frequently molest or assault children because it is not part of their value system

° The cultural values of Canadian society are demonstrated by the actions of political leadership and subsequent community responsiveness

° Politically supported and government funded systems and institutions currently perpetuate male dominance and power over women, children and their families

° Native/Aboriginal/Metis communities' traditional values have broken down with a resulting distortion of value systems because they have been denied their own institutions and their power and jurisdictions have been removed leaving them in poverty, a contributing factor to powerlessness, which in turn has led to sexual abuse of children

° The healing of sexually abused children is no substitute for prevention of the root causes of child sexual abuse

° Treatment of the offender needs to be a major direction of primary prevention

B. STRATEGIC OBJECTIVES

The following pages contain a summary overview of the discussion held in the twelve multi-disciplinary/jurisdictional strategy groups as it pertained to the fourteen strategic objectives presented for discussion in the thematic area of primary prevention.

Strategic Objective 1 (Groups 1, 4, 6, 9, 11, 12)

Develop a three-tiered, multi-media campaign to a) demonstrate the value of children and their importance to the well-being of society; b) convey the message that neglect and abuse of children have no place in a caring community and will not be tolerated; and, c) provide information about child abuse reporting and support services.

° more important to address violence and sexism in media/ corporate sector must be made aware of the social damage of their (advertising) messages/ social institutions (professional schools, schools, churches) are important agents of attitude change (Group 1)

° public awareness campaign should be led by federal government with some private funding and coordinated with all other jurisdictions/ awareness campaign must include focus on power imbalance created by patriarchal society with focus on abuser as well as victims-survivors/ need to avoid stressing already overstressed systems by distributing portions of alloted monies to address specific local concerns with parallel contribution to local systems and resources (Group 4, 9)

° concern that awareness programs avoid "family blaming", i.e. implying that the origins of child sexual abuse lie in families and that families (in the abstract) must therefore end it (Group 6)

° much disagreement as to whether to have media campaign at all/ important way of communication but very expensive and could be cop-out/ should only be part of comprehensive response/ campaign would be surrounded by contradictory and sexually stereotyped messages/ other uses of media possible, e.g. media-watch, dealing with sexual stereotyping (Group 11)

° mixed opinion: premature to devote precious resourcesto media campaign; is it ethical to sensitize people to the problem when we don't have resources for treatment and support?/ if campaign is launched, it should be encouraging to parents as to their positive roles; real life situations should be represented; explicit use of what abuse and violence is without sensationalizing isolated, atypical incidents (Group 12)

Strategic Objective 2 (Groups 2, 6, 9)

Review all relevant legislation to ensure that children, as a priority community of interest, are accorded proper and equitable protections, rights and treatment under the law.

° first ministers should review and endorse process/ change legislation to mandate treatment of abusers and allocation of competent resources/ support needed from all levels but need to acknowledge that legistation alone will not change deeply rooted societal values (Group 2)

° debate over which comes first: awareness or policy changes; social vs. legislative change; role of government vs. community/ External Affairs and Justice Departments must respond to draft U.N. Declaration on the Rights of the Child and federal/provincial statutes amended accordingly/ federal monitoring and leadership role by maintaining

position of Special Advisor/ implement national child care program through Health & Welfare/C.A.P. (Group 6)

Strategic Objective 3 (Groups 1, 3, 9)

Review all relevant policies and practices of social institutions serving children (e.g. health, educational, cultural, religious, recreational, legal and social services) to support the use of a child-centred approach in the planning and delivery of all services involving children.

° re education systems: need vehicle for federal-provincial communication re educational issues/ goal is to empower children in the most general sense and clarify roles for adults within this context/ education approach must and will deal with power and sex role issues for offenders (incl. adolescents) as well as victims/ training of teachers, ECEs must include value/power issues as well as specific training in prevention strategies/ orientation for new Canadians needs to include material on roles, values and laws re abuse and treatment of children (Group 1)

° need to make explicit the assumption that all activity re child sexual abuse be child-centred and that a review be used to promote that end/ review would also provide important index of current status/ children's direct input should be sought (Group 3)

Strategic Objective 4 (Group 8)

Develop and support child advocacy strategies and structures mandated to research and promote the priority needs and interests of children.

° federal child advocate/minister with child advocacy office and permanent sexual abuse adviser working with national non-government advocacy advisory council/ must work for children across jurisdictional, disciplinary and systems' boundaries/ parallel structure with federal support at provincial levels (Group 8)

Strategic Objective 5 (Groups 5, 11)

Develop additional public awareness and advocacy strategies for use in native and aboriginal communities and incorporating child-positive values consistent with their culture.

° DIAND should provide financial resources to native communities on reserves, particularly through native women's groups (they get results)/ identify one funding body for urban native issues funding re child sexual abuse/ discuss child sexual abuse in context of native ownership of the issue and recognize differences in individual native groups/ natives first need to accept issue as their own/ caution re pilot projects which lack on-going funding plan; need to work with native planners re this danger (Group 5)

° should be led by native groups and coordinated with federal and provincial levels. Involve provincial native groups as well as band councils, women's groups, etc. Materials should be interpreted not

simply translated so as to ensure cultural appropriateness and sensitivity. Must be better coordination and less duplication. Need for clarification as to who is responsible.(Group 11)

Strategic Objective 6 (Groups 9, 12)

Promote the concept of families as "nurturing centres for children" by strengthening their ability to provide adequate social and emotional development experiences for children.

° Change "Promote the concept" to "Develop the capability" (Group 9)

° Clarify definition of families to include mothers, fathers, siblings, extended family members and clans. Revise view of traditional family as only source of emotional support -- communities must also be responsible for families and be seen as a family of families with a wide variety of forms (Group 12)

° Through financial incentives to government departments and tax breaks to corporations, assist employers and employees to become aware of their responsibilities to families and to audit and become sensitive to the implications and outcomes of their funding practices as they affect people in their parenting roles (Group 12)

° Require that an interministerial approach be taken to the funding of prevention programs with all departments working collaboratively for the best use of limited funds. Use outside people in isolated communities to put forth challenges in "promoting" the concept of a new vision of families (Group 12)

Strategic Objective 7 (Group 6)

Provide "values-for-living" courses for both children and adults, designed to promote values that support a caring, child-positive society.

° Discussed but no notes submitted (Group 6)

Strategic Objective 8 (Group 12)

Develop "media literacy" skills among both children and adults to promote awareness and response to the role played by the media in portraying and promoting child-positive values.

° One member was opposed to launching a media literacy campaign: the federal government through the CRTC has ability and responsibility to take a stronger role in censoring violence depicted on TV (Group 12)

Strategic Objective 9 (Groups 4, 5, 7, 9, 10)

Promote core curricula training in child development and current children's issues in all appropriate post-secondary education and other training programs for professionals and volunteers working with children to promote positive attitudes towards children, based upon accurate knowledge about children's capacities and capabilities.

Primary Prevention

° Education should cross all sectors. Post-secondary education also needs to address child development and child sexual abuse. Program development must consider potential and current abusers among current and future professionals. Must become a priority in curricula development at all levels (Group 4)

° Health & Welfare should advocate with professional associations re priority of child sexual abuse; survey training schools to determine what's currently being done; focus particularly upon psychiatry because of volume of ptaients with sexual abuse histories. Individual professionals should also lobby their respective schools and professional associations (Group 5)

° Need to determine conceptual model to promote common approach, e.g. child sexual abuse as part of child abuse spectrum; as part of spectrum of family violence; as part of spectrum of sexualized violence (Group 5)

° Current examples: U.B.C. Family Practice Unit; B.S.W. Program at St. Thomas University (Group 5)

° Professional organizations, examining bodies, accreditation boards are key; approach should be positive and persuasive rather than coercive, at least initially. Also involve organizations that use or rely upon volunteers re training. Encourage corporate sponsorship of professional training through donations and tax break incentives (Group 7)

° Training initiatives must be linked with initiatives in treatment and research (Group 9)

Strategic Objective 10 (Groups 4, 5, 8, 9, 11, 12)

Create school-community partnerships to develop and/or adapt comprehensive, developmentally-appropriate preventive education programs from pre-school through primary to secondary levels.

° Prevention programs should be developed and implemented at the local/regional level by school boards; corporate support should be sought; research component must be built in. All programs must be prepared for and able to address potential backlash (Group 4)

° Health & Welfare should fund a conference for all provincial Ministers of Education on the role of schools in responding to and preventing child sexual abuse; involve Canadian Teachers' Federation. Provinces should make child abuse curricula mandatory in schools but must also ensure adequate community supports re disclosures and possible allegations against teachers and other school board personnel. Will be difficult to introduce in jurisdiction which won't permit issues of "normal" sexuality to be addressed in schools. Develop creative use of media support to emphasize positive aspects of programs, not simply report disclosures (Group 5)

° Federal level should collect and disseminate program information and research from across the country; monitor for age-appropriateness; provide capital funding for national computer data base. Provinces should make programming mandatory in all schools (e.g. Manitoba); need also to address special needs of street kids (also pre-schoolers). Programs should be under general umbrella of personal safety programs,

not sex education, and should be seen as early identification (Group 8)

° Standards and guidelines for program development and delivery must be developed and monitored. Programs should also be targeted at new Canadians at point of entry (Group 9)

° Research and evaluation priorities should be set at federal level, monitored and distributed across the country. Ensure adequate training in teachers' colleges and on a continuing basis for practicing teachers; develop personnel policies and practices in schools to promote standardized response to disclosures, including those involving school personnel. Process is key; need to apply the fundamentals learned through grass-roots programming to the upper levels of policy development and government (Group 11)

° Consensus must be developed on content and philosophy (standards and guidelines). Families and churches must work with schools, not abdicate responsibility. Local communities must be free to adapt and design their own programs so that they assume responsibility (Group 12)

Strategic Objective 11 (Groups 2, 9, 11)

Provide adapted and/or additional prevention programming to children at highest risk of victimization, e.g. children with either personal or family histories of abuse; with physical, emotional and/or developmental disabilities; exposed to substance abuse; with single, step or foster parents; who live in remote and/or isolated communities; who are recent immigrants; and/or who live in institutions or other alternate care arrangements.

° Be sure that wording does not imply that being poor, immigrants or isolated in itself does not imply abuse (Group 2)

° Ensure that programs for natives and other targetted populations are culturally sensitive; involve communities of interest in program development; develop capacity for program delivery in different languages (Group 11)

Strategic Objective 12 (Groups 5, 7, 9, 10, 11)

Develop specific preventive education strategies aimed at individuals in frequent contact with children and/or at high risk of sexually abusing children, e.g. parents, teachers, volunteers, clergy, doctors, and adults and adolescents who were sexually abused or exposed to other forms of violence within their families during their childhood.

° Objective too general to be useful. Federal departments and provincial ministries can provide incentives by giving priority funding to those voluntary organizations which have acceptable screening mechanisms in place, e.g. Big Brothers; must acknowledge concern that screening is a disincentive to volunteering (Group 5)

° Objective too broad; separate strategies for people in positions of trust from those at high risk of abusing. Global theme must be reinforced that children do not bear the responsibility for protecting themselves (Group 7)

° Amend to read "Develop and strengthen..." (Group 9)

° Federal government should provide funding incentives to universities for child sexual abuse curricula development. Professional accreditation exams should include questions re child sexual abuse. No one currently seems to have responsibility in this area; therefore federal government should take initiative to build bridges to and between schools and universities, provinicial ministries and professional unions. Teachers, lawyers, etc. should receive training regarding needs and concerns of indigenous communities (Group 10)

° Multi-level involvement to ensure ownership. Mandate responsibility for prevention in job descriptions of various disciplines. Amend personnel policies re disclosure and investigation within own organization, etc. Provinces should provide all or most of the funding for the appointment of child abuse prevention coordinators at the local level to act as focus and catalyst; best ideas come from the "bottom" and the "top" levels must acknowledge and support this (Group 11)

Strategic Objective 13 (Groups 6, 8, 9)

Involve self-help, neighbourhood and service organizations in the planning, delivery and promotion of services and programs to assist children, particularly those who have been sexually abused.

° Community involvement and awareness must be linked to government policy development; social change must be connected to legislative change (Group 6)

° Federal level should provide information and educators so community can seed own programs; provide demonstration monies to fund cooperative ventures in prevention; if not forthcoming on voluntary basis, tax corporations to finance prevention programs. Efforts must be community-driven; governments to support, stimulate and fund (Group 8)

° Compartmentalized, factionalized efforts should be redirected into coordinated continuum of efforts (Group 9)

Strategic Objective 14 (Groups 2, 8, 10)

Develop mechanisms to stimulate program evaluation and research to refine and enhance prevention strategies, and promote information and training exchanges among prevention programs throughout the country.

° Program evaluation and research must involve all levels of government with efforts to stimulate interest of academic community. Federal level must demonstrate leadership by declaring long-term commitment of monies for research and evaluation; national computerized data base needed with support for national centres of excellence. Provinces could require that a portion, e.g. 20 percent, of grant monies be earmarked for research and evaluation. Local level must promote multi-disciplinary training and ensure that information disseminated by federal and provincial levels is widely distributed (Group 2)

° Federal level should support the development and circulation of sample content and format for program evaluation; as policy, all proposals should be juried among at least five sources across the

country to ensure relevance and appropriateness (Group 8)

° Federal level should support establishment of national association of prevention specialists, similar to the American Association of Sexual Abuse Prevention Specialists (ASAPP), and coordinate regional centres to undertake specific research. Local specialists should provide training to generalists on basic prevention themes and strategies also critical to investigation and treatment. Independent centre for research and evaluation of prevention efforts in native and aboriginal communities should be established with these communities being encouraged to develop their own structures and mechanisms (Group 10)

Additional Objectives Recommended

Provide child abuse education programs to new immigrants (adults and children) at point of entry (Group 9)

The government's role should be to reduce stress and provide supports to families by, for example, providing adequate child care, ensuring pay equity, guaranteeing minimum annual income, ensuring adequate supplies of affordable housing, extending paid parenting leaves, and addressing child poverty issues (Group 10)

Federal and provincial governments should recognize the rights of aboriginal peoples to self-determination, including the provision of all necessary support for the promotion and establishment of aboriginal institutions and mechanisms for child and family services operating under laws and policies that are consistent with the right of self-government for aboriginal peoples (Group 10)

C. RECOMMENDATIONS FROM THEMATIC ISSUE GROUP ON PRIMARY PREVENTION

1. That the workshop recommend to the Special Advisor that his report address social, economic and political underpinnings of child sexual abuse (moved by Doug McCall, seconded by Catherine Stewart, carried unanimously)

Discussion included point that while child sexual abuse is indeed a critical issue, it cannot be divorced from the power-based relationships that characterize our society. Child sexual abuse is complex and must not be dealt with in isolation; other considerations such as poverty, housing shortages, Sec. 43 of the Criminal Code and the vulnerable position of children, especially those who are disabled, must be taken into account.

2. That Heather-jane Robertson's recommendation (printed separately) be incorporated into the final report of the workshop (moved by Heather-jane Robertson, seconded by (unknown), carried 27 in favour, 4 opposed, 9 abstentions, 3 observers)

3. That there ought to be an ongoing special federal interdepartmental mechanism whereby policies, activities, actions and laws can be evaluated in terms of their impact on the well-being of children, particularly with respect to protection from sexual abuse and that this mechanism include the following characteristics:

a cross-section of relevant federal-level departments (not just one responsible Minister); extension of the position of the Special Advisor; long-term and on-going planning at a federal level; a national advisory committee; and provincial government advisory bodies (moved by Catherine Stewart, seconded by John Chudzik, carried unanimously)

4. That as a result of this meeting, a national organization for primary prevention be formed to represent the concerns of professionals and also community-based volunteers and that the Special Advisor endorse such a concept and call for funding and support of this organization by the federal government (moved by Donna Harris, seconded by Gail Gould, carried unanimously)

5. That a multi-media campaign not be undertaken unless a community-based strategy is in place; there has been a proper and thorough analysis of public attitudes; and it is linked to local and community-based strategies (moved by Doug McCall, seconded by John Chudzik, carried 26 in favour, 1 abstention, 2 observers)

6. That the Special Advisor's report include a recommendation that there be a comprehensive outreach program to implement a strategy to involve all sectors (notably the education sector) of Canadian society in the prevention of child sexual abuse (moved by Doug McCall, seconded by Heather-jane Robertson, carried unanimously)

Other issues for consideration:

° Regional multi-disciplinary centres of excellence should be established to carry out research, develop programming and training, and disseminate information about the issue of child abuse; should be funded by Health and Welfare (contact Dennis Lucas)

° Government action at all levels is essential; consensus already achieved that strategies be put in place to resolve this social problem

° Concern about "gender laundering" may lead to reverse chauvanism which makes it difficult to consider females as perpetrators

° Request that workshop synopsis be prepared and distributed to all participants so that they can make comment

II. LEGAL RESPONSE

A. ASSUMPTIONS AND PRINCIPLES

- Sexual abuse is an assault against a child which constitutes a violation of both civil and criminal laws demanding a comprehensive social response coordinated within a legal framework designed to protect child victims and hold their offenders accountable.

- The coordination and use of both social and legal interventions is necessary to minimize unnecessary interference with or disruption of the child victim, help create a safe environment in which the child can recover, and provide maximum leverage for the control and treatment of the offender.

- A special legal framework governing child sexual abuse, including specific offences and provisions to facilitate the collection and presentation of children's evidence, is justified and acknowledges the special needs created by children's vulnerability to sexual abuse and their different developmental stages.

- The extent of child sexual abuse and the range of response required to deal with its complexities, demands the creation of specialized, multi-disciplinary teams of professionals with expertise in child development, child sexual abuse, and applicable legislation, policies and practices.

Comments from Strategy Group Discussions

° Support for use of criminal justice system but suggest a simplification of the system and how it deals with child sexual abuse. Could be developed in consultation with the Canadian Bar Association under direction of federal and provincial governments

° Offenders must be accountable for their crimes through the criminal justice system

° Legal system is fundamentally flawed to 'find the facts' where young children are victim-witnesses. System needs to be reformed to address the realities of children without violating fundamental rights accorded the accused

° Use of term "legal issues" is misleading and too restrictive: use "socio-legal"

° Need to consider legal interventions within the context of a larger justice response, i.e. adversarial system not necessarily just

° More distinction needed between intra- and extra-familial abuse

° Specialization as a concept is difficult to promote in small, rural and remote communities

° Notwithstanding shortcomings of present criminal justice structures and procedures, the laying of a criminal charge is, at present, the

only opportunity for society to make a clear statement on the issue

° Should the criminal justice system be involved in every case or should there be pre-trial diversion for some? Impossible to predict who is treatable and who isn't; who should get diversion and who shouldn't. Unless automatic, children will feel pressure and may recant. Delayed sentencing pending treatment outcome is far more preferable than pre-trial diversion.

° Overwhelming demands on legal system raises questions about its continued efficacy; must combine strategies with civil laws as well

° Adversarial system cannot generally also be responsive to children's needs; conflict between Crown's use of child as key witness and the child's personal needs

° Specialization in whatever forms it may take is absolutely necessary; training of both specialists and generalists must be continuous and on-going; does not have to be expensive if local commitment to coordination and sharing of expertise exists

° As presently structured, the legal system is not meeting the needs of victims; we (Group 1?) do not have confidence in an effective legal response based on the current system due to the following concerns:

-emphasis upon punishment, rather than accountability

-sexism and racism are pervasive

-where diversion is used, it seems to be available only to white people of economic means and in urban communities

-with the emphasis upon 'proving guilt', the victim's rights are not considered as important as the accused's; often the burden of proof rests on the victim which becomes yet another form of abuse

-this issue is incredibly complex and the criminal justice system cannot deal with ambiguity and complexity

-tension occurs because a private domain (women and children are most often abused by those they know) is being placed under public scrutiny; the intimacy of this situation must be acknowledged by those who administer justice

-justice system has taken on a life of its own where judges have become all-powerful, regardless of their level of ability and track record

-legal system limits possibility of natural process of forgiveness and healing because of the horror that victims go through in court

-it is common for children not to be listened to in court as well as being intimidated and discounted

-we will encounter a large number of adult survivors who will

come to the attention of the legal system much later in life; their needs and vulnerabilities must also be attended to along with those of child victims

Suggested amendments:

° Sexual abuse is a crime against a child...

° Sexual abuse is an assault against a child which constitutes a violation of both civil and criminal laws demanding a comprehensive legal reponse coordinated within a social framework...

° Sexual abuse is an assault against a child which consitutes a violation of the child's well-being demanding a comprehensive legal response coordinated within a social framework designed to protect child victims and hold their offenders responsible.

° An appropriate legal framework governing child sexual abuse...

° The extent of child sexual abuse and the range of response required to deal with its complexities, demands the creation of multi-disciplinary teams of professionals with specialized training in...

Suggested additions:

° Natives should be allowed to develop own response to sexual abuse. The native culture is so different that it cannot be transplanted into white culture. This self-governing system should apply to all natives both on reserves and within urban centres. Their model could become a model for consideration within white culture. (Positive features within native culture to support this: long-term - seven generation - outlook; clear laws and steps for accountability; public recognition that abuse is a crime but want to deal with this within their own ways of holding their people responsible; caring for children is a community responsibility that will govern their response to this issue.)

° In criminal proceedings, there is often a fundamental conflict between the interests of the Crown Attorney, who sees the child as a witness necessary for prosecution, and the interests of the child, who has a much more complex series of objectives and issues arising from the sexual abuse. The legal system is ill-equipped to deal with this conflict.

° Although they are not necessarily in conflict, the perception that society must choose between principles of fundamental justice (such as the presumption of innocence) and meeting the special needs of child victims and witnesses presents a major challenge to be met by those inside and outside the legal systems. Where these interests genuinely conflict, choices which favour children in adult-biased systems must be made.

° In appropriate cases, alternative mechanisms to the existing legal system need to be identified and developed to ensure that the rights and interests of the child are respected and enforced; and that the needs of the child, the needs of the offender, the role of the family, the role of the community and the role of professionals

are coordinated to provide for a non-adversarial and comprehensive social response to the problem of child sexual abuse. (Submitted by an individual)

B. STRATEGIC OBJECTIVES

To simplify the reporting process, the strategic objectives in this section will be grouped into three categories: Multi-disciplinary Case Coordination/Protocols/Guidelines (Objectives 1, 2, 3, 4, 5, 14, 22, 23, 24); Education/Research/Information-Exchange (Objectives 6, 7, 8, 18, 19); and Legislation/Court Procedures (Objectives 9, 10, 11, 12, 13, 15, 16, 17, 20, 21, 25).

Multi-Disciplinary Case Coordination/Protocols/Guidelines

1. Develop minimum standards and procedural protocols for multi-disciplinary practice among all professionals involved in the investigation, assessment, supervision, and prosecution of cases involving the sexual abuse of children. (Groups 1, 3, 5, 6, 9, 11)

2. Create specializations within child protection, police and prosecuting agencies and ensure that these professionals have both introductory and advanced training together. (Groups 1, 2, 6, 9, 11)

3. In cases where both civil and criminal proceedings are planned, create mechanisms to support coordinated planning, consultation and monitoring. (Group 9)

4. In cases involving sexual abuse by a family member or other individual with potential access to the child, provide for review and coordination of custody or access recommendations by both child protection and criminal justice personnel. (Group 9)

5. Create opportunities for contact and dialogue between legal/investigative personnel and treatment providers to promote mutual education, facilitate coordination of legal and treatment strategies and encourage early resolution of conflicts which may arise from different disciplinary perspectives. (Groups 5, 9)

14. Develop special procedures within and between each system to respond to the investigation, prosecution and supervision of child sexual abuse cases which are extraordinary in nature, e.g. multiple victims and/or offenders, allegations involving a high-profile offender and/or particularly sensitive circumstances, alleged ritual and/or cult-inspired abuse. (Groups 2, 9,)

22. Standardize and coordinate local, provincial/territorial and national registration systems to aid in the identification of individuals with histories of child sexual abuse offences prior to their commencement of paid or volunteer work involving contact with children. (Group 9)

23. Develop mechanisms to require consistency and coordination in the development and implementation of provincial and federal laws

as they affect victims of sexual abuse. (Groups 6, 9)

24. Provide every child victim with a primary support person or advocate whose function is to provide information and support to the child, encourage responsive case management and coordination between systems, ensure that appropriate services are in place when needed and, in general, act as a buffer between the child and the demands of the outside world. (Groups 3, 5, 6, 7, 8, 9, 10, 12)

° need to distinguish between standards, guidelines and protocols; are protocol committees for case-conferencing or general policy and practice discussion - advocacy and/or information exchange?

° if specialization is not broadly possible, create specialist consultation teams on a regional basis which can be called in and/or consulted when necessary; these specialists can also provide specialized training to local generalists through case conferencing and organized sessions

° suggest adapting model of the Justice Institute in British Columbia as a model for integrated, cross-system training/ Should there be certification for specialists, e.g. certificates for drug and alcohol addiction counsellors?

° all disciplines (teachers, nurses, doctors, lawyers, etc.) should receive training in matters related to child abuse and reporting requirements, as well as child development, during the course of their academic training

° commitment to coordination is essential in order to promote concept of joint, on-going interdisciplinary training

° the child's primary support person/advocate and the child's therapist (if different) should be protected from supoena by law (see Québec Charter of Rights, s.11)

° provincial legislation should mandate the establishment of local child abuse coordinating committees and develop funding mechanisms to ensure their maintenance

° "the laws are in place; let's implement them": provinces must be encouraged to develop plans and assign personnel and resources to ensure implementation of all existing criminal and civil child abuse legislation

° fear that children caught in custody/access disputes are at high risk since they seem to fall between the cracks/ Who's really looking after their safety?

° provincial legislation/standards should set ceilings on maximum case loads for child protection, police, crown attorneys, etc.

° need for child support person strongly supported (most frequently discussed objective) and various models (use of volunteers, social workers, legal personnel) were discussed: no consensus on model but unanimous support for provincial support and facilitation of concept

° Canadian Association of Victim-Witness Assistance (sic) needs to examine its role relative to children as witnesses

° training and introduction of child advocates should be tied in with Bill C-15 but advocates should not be limited to court support

° the process of developing protocols at the community level is an important process for developing awareness and creating networks that form the basis for multi-disciplinary teams. Provinces, therefore, should develop general standards and guidelines but leave the development of implementation plans (protocols) to local communities

° specialization seen as essential to achieve shift in attitude and promote consistent standard of response/ need to keep training generalists as well/ comprehensive planning needed

° in sparsely populated areas there are many issues to be addressed by a very small number of people which must be recognized when considering who will provide support or volunteers or leadership for new programs, e.g. primary support person for child victim

Education/Research/Information-Exchange

6. Develop data collection systems which will provide access to local, regional and national statistics on reports, investigations and legal outcome of both civil and criminal child sexual abuse cases. (Group 9)

7. Support multi-system research to document and assess the impact of different variables which may affect children's ability to cope with the additional stresses provoked by the disclosure, investigation and prosecution of their sexual abuse. (Group 9)

8. Develop mechanisms to collect and disseminate information about legal precedents, constitutional challenges, innovative practices, case decisions and other developments which may affect legal response and decision-making. (Groups 8, 9)

18. Research, test and determine the impact and appropriateness of diversion programs and other alternatives or variations to incarceration for some offenders. (Groups 3, 9, 12)

19. Research and develop recommendations regarding appropriate classification, management and treatment of incarcerated offenders, both during and subsequent to their incarceration. (Groups 3, 9)

° need to test impact of diversion at sentencing, e.g. delayed sentencing/ how to monitor/ does it work?/ for whom?/ how does availability of treatment affect outcome?

° current and future project/programs must not only be evaluated but the results must be widely distributed/ development of evaluation criteria and research questions should be done in consultation with team of experts/ same questions should be tested in a variety of settings

° development of a mechanism for collection and analysis of national data is needed to make a clear case for the requirement for more funds to support the processing of sexual abuse cases through the criminal justice system

° build alliances with other groups that are attempting to reform the criminal justice system and advocate a profound and thorough review of the system from the victims' perspective leading to the design and testing of alternative models

Legislation/Court Procedures

9. Support and monitor the implementation of Bill C-15 and coordinate preparation and participation in its 1992 parliamentary review. (Groups 8, 9, 10)

10. Reform court administrative procedures which create additional difficulties for children in court, e.g. scheduling, interruptions and delays, frequent changes in prosecutors, lack of private waiting facilities, difficulty in accessing information. (Groups 1, 7, 9)

11. Ensure that all children who may be required to testify in court are provided with information, preparation and support in advance of and throughout all court proceedings. (Groups 1, 9, 11)

12. Design and test additional mechanisms to facilitate the presentation of children's evidence, e.g. alternatives to direct testimony, third party evidence, expanded use of expert testimony. (Groups 1, 9, 12)

13. Develop and seek adherence to guidelines for the ethical treatment of children and other vulnerable witnesses, particularly as it relates to cross-examination. Groups 1, 3, 6, 9)

15. Review policies and practices which may have combined to act as disincentives to potential expert witnesses, e.g. scheduling, compensation, lack of preparation. (Groups 3, 9)

16. Develop strategies to inform and educate judges about the capacities of child witnesses, the dynamics and characteristics of child sexual abuse, and the role of treatment in the rehabilitation of offenders and long-term prevention of child sexual abuse. (Groups 1, 3, 5, 8, 9, 10, 12)

17. Develop guidelines to assist prosecutors, defense counsel and judges in recommending and determining appropriate sentences for offenders. (Group 9)

20. Taking into account children's special needs and the legal objective of obtaining the best possible evidence, design and test alternative or adapted models for disposition of cases in northern and remote communities which normally rely upon the use of circuit court judges. (Group 9)

21. Explore the feasibility and desirability of redesigning or adapting current legal procedures and structures to conform with

the cultural needs of aboriginal communities. (Group 9)

25. Ensure that all child victims are informed of their right to apply for victim's compensation and/or to seek civil damages from their offender; and reform civil statutes of limitations to conform with the frequent reality of delayed disclosure of sexual abuse. (Groups 6, 9)

° there should not be provincial differences in reporting requirements; federal government should play advocacy role to resolve

° victim support services should be established and/or enhanced in all provinces with provincial funding as as integral part of the justice system

° federal funding should be used to supplement and act as incentive to provinces in implementation of Bills C-15 and C-89
° highlight best options/innovative approaches across the country/ provinces need federal assistance for implementation of new programs

° develcp practical and concrete measures to acknowledge respect for and understanding of the role of victim -witness in court/ increase fees to expert witnesses

° identify & expand list of particularly vulnerable children, e.g. street kids, teenage prostitutes, deaf children, etc.

° ensure that multi-victim and/or offender cases are monitored by a clearly designated individual in each local system with data collected provincially and nationally

° ensure that the defendant's rights do not abrogate the rights of the victim

° focus alternatives to incarceration at sentencing stage; do not divert prior to conviction/develop mechanisms for treatment services to be brought into jails/prisons from the community

° use new Judicial Education Centre to reach judges through "acceptable" channels; need for national and/or provincial judicial conferences on child sexual abuse, e.g. conference on law and medicine scheduled for October 1989

° give priority to creating "child-friendly" courts and promote development of lawyers' code of ethics (examples: France has reduced adversarial nature of court by having judge pose questions to child with the defence having the right to cross-examine if desired - it is not felt that there has been a compromise of the accused's rights)

° seek input from Manitoba Native Justice Enquiry Justices Sinclair and Hamilton re their findings

° introduce mandatory training for all recently-appointed judges and ensure that appropriate and current training on child sexual abuse is available at the National Judicial Training Centre, preferably

provided by a multi-disciplinary team of non-judicial trainers

° provinces should be encouraged to develop mandatory training and continuing education for provincially-appointed judges/can provincial and federal judges be trained together?

° Bill C-15 has resulted in an increase in the number of successful prosecutions but judges are completely unprepared; they generally know litle about children and even less about the dynamics of child sexual abuse/citizen panels, e.g. Ontario, should have input into the appointment of all judges

° critical need for further dialogue and policy/practice development regarding response to adolescent offenders and coordination with the Young Offenders' Act

° code of ethics for defense counsel should be developed through the Canadian Bar Association in cooperation with provincial Law Societies; co-development and monitoring through interdiciplinary community-based committee(s)

° those seeking civil damages against their offender must have access via increased funding to legal counsel

° child abuse cases must receive high priority within the justice system/ guidelines re scheduling, vertical prosecution, etc. are not enough; requires policy directives and support from the highest levels of the justice system

° deliberate delays and postponements by defence attorneys require initiative vis à vis legal ethics

° delayed sentencing as a possible outcome may provide added incentive to accused persons to enter early guilty pleas, thus eliminating the need for trial

° courtroom design and redesign is important but not easily adaptable to rural communities which have no courtrooms

° Special Advisor should ensure that the framing of the parliamenrtary review of Bill C-15 is on the agenda of the concerned federal and provincial Ministers by 1990/bring by secondment or special arrangement those from the field who can train and monitor to overcome low level of expertise in federal government, particularly in the Department of Justice and justice advisory to Health and Welfare/ need for secretariat in conjunction with Special Advisor

° planning for C-15 review should plan who will be responsible; what form will discussions take; what measures of success will be used; who will be consulted; what information/research will be required and will it be available, etc.?

° C-15 review must involve NGOs which should be provided with information to facilitate their active participation in the review/all pilot project descriptions and evaluations should be available and widely distributed/federal funds should be available to facilitate participation in the review process by consumer/survivor groups and

community-based organizations so that politicians hear from the "real" world and not just from national groups like the Canadian Bar Association and the Canadian Teachers' Federation, both of which have promised aggressive lobbies to turn back those provisions which gave children greater voice in the courtroom

° there must be improved and greatly increased circulation of information related to the continuing implementation of Bill C-15; very little reliable information is available/ perhaps an advisory bulletin issued bi-monthly through the Canadian Council on Children & Youth and/or the Justice Department might help

° need to distinguish between criminal and civil law processes and the appropriate use of either and/or both/need to ensure that personnel from each system are aware of and working in cooperation with other system/need for child support person or advocate to pull all the pieces together

° must be prepared not only to defend current provisions of Bill C-15 but also to press for further reform, e.g. admission of statements to third parties (see Bala workshop discussion paper)

° judges, crown attorneys, police and all professionals involved in processing child sexual abuse cases must have a minimum standard of knowledge about the issue of child sexual abuse and, in addition, about issues related to aboriginal and cross-cultural concerns that impact on cases in their jurisdictions

° victim's rights within the legal system should be codified

° those preparing children for court must be specialists; do not have to be lawyers, could be specialized social worker but not the child protection worker/legal aid should pay for child advocate/ volunteers may be used but only in limited role with clear restrictions: this is a specialist's field/should be advocacy agency within each judicial district (examples: Edmonton Police, Victim Assistance Program in B.C.

° lack of judicial accountability allows for the possibility of some judges to be unresponsive to the needs of victims of child sexual abuse: this is sacred ground that needs to be challenged! (One participant knows of judge who has not convicted a single case of child sexual abuse. The question is raised about the impact of his personal prejudice on this result. The fear is that a judge who disbelieves can make a ruling based on this belief rather than on the evidence presented.)

° native court worker model should be considered for adaptation to child sexual abuse cases, e.g. one native person helps another through the court process: provides advantage of there being at least one person whose <u>primary</u> reponsibility is the victim's best interests

° maximum terms for probation should be extended to allow reasonable time for treatment

Additional Objectives Recommended

Ensure that the exercise of the defendant's rights do not abrogate the rights of the victim (Group 3)

Support services must be developed in order to effectively support local protocols and ensure that standards are met (Group 4)

Initiate policies to guide procedures for selection of judges and for enforcing judicial accountability (Group 12)

C. RECOMMENDATIONS FROM THEMATIC ISSUE GROUP ON LEGAL RESPONSE

1. Workshop Discussion Paper (by Nick Bala)

Subject to the few qualifications noted below, there was strong support for the detailed recommendations set out in the Bala paper on the legal issues workshop held in Vancouver in November 1988. The only qualification was around reporting by therapists (p.10/ 2. below) and diversion (p.8/ 3. below).

2. Mandatory Reporting for Therapists of Abusers (Bala, p.10)

By a vote of 25-1, the group favoured no change to mandatory reporting system. Therapists should be obliged to report any situation where there is a child at risk. In fact, therapists exercise discretion re reporting of "historic" abuse where no child is presently at risk.

Truly voluntary disclosure by abuser should be taken into account for diversion/sentencing. "Truly voluntary" does not necessarily include seeking of help following child's disclosure and spouse's pressure. Very bad to leave child at possible risk, though non-reporting by therapists may reflect lack of trust in system.

3. Diverson (Bala, p.8)

Judge Porter described the Hinton, Alberta experiment of post-plea pre-sentence diversion while therapy is undertaken. There was strong support (25-1) for allowing/encouraging this type of diversion on experimental basis, provided:

a) post-charge only, i.e. maintain "lever" of charge and criminal justice system

b) follow-up in place to ensure that offender pursues and stays in therapy

c) the victim's views are sought re amenability to treatment of offender.

In Hinton, there have been more disclosures, more guilty pleas, more family reunifications, and less trauma to the child victim. There is a need for more on-going research into diversion, including criteria for eligibility, i.e. is distinction between intra- and extra-familial valid? Are Criminal Code amendments necessary?

Three year maximum on probation must be extended.

4. Multi-victim/Multiple Offender Cases

There is a need for training, protocols and specialists. Need national resources and support. Do not stop investigations too soon.

5. Research

Legally trained persons should be included in the design and implementation of research about the effects of the criminal justice system. Computers should be available to assist both research and court preparation. Research priorities include:

- montitoring of C-15 (videotaping, closed circuit)
- effect of court process on children
- male vs. female victims; are there more convictions when boys testify?
- Incidence and prevention of suicides by accused persons pending trial

6. Training

Emphasis on need for interdisciplinary training, i.e. interdisciplinary knowledge from interdisciplinary teams to interdisciplinary groups. Model programs in New Brunswick (province-wide, interdisciplinary one-week program with experts/master trainers), Victoria and Québec.

Better training is cost-effective because it supports better investigations, more guilty pleas, and early identification of false allegations.

Need small, national resource centre for training, monitoring and research (federal role). Also need provincial training centres and staff, though need not be full-time; it is desirable for trainers to keep practicing.

7. Dissemination of Information

Federal role in establishing network and disseminating information, e.g. (early) Clearinghouse and Vis-à-Vis model.

8. Specialization

Feeling was that senior management in services like R.C.M.P. and Crown Attorneys in provinces like Ontario are not sensitive/aware of need for training and specialization or the price being paid due to the lack of it. Recognition that in remote and rural areas specialization is not feasible, but additional training and support is essential.

III. TREATMENT & SUPPORT

A. ASSUMPTIONS AND PRINCIPLES

- The sexual abuse of a child is a traumatic event which, in addition to legal response, also requires the availability of comprehensive and specialized treatment services for all those affected in order to aid in recovery and healing and to minimize the risk of further abuse of the same and/or additional children.

- Given the range of variables which influence the degree of damage caused to victims of sexual abuse and the timing of its disclosure, treatment services must provide for needs ranging from immediate crisis intervention following disclosure through intensive treatment to long-term periodic support during periods of relapse and stress.

- Opportunities for treatment begin upon the disclosure of the sexual abuse and should be a component of all subsequent intervention, from the investigative process to counselling through preparation and appearance in court and beyond.

- The sexual abuse of a child is a criminal act for which the offender, regardless of relationship with the victim, must be held solely accountable and, in order to maximize the effectiveness of both legal and treatment interventions, this perspective must be integrated into all treatment methodologies used with victims, offenders and family members.

- Community response must reflect the safety and recovery of the child victim as its continuing priority and, accordingly, all treatment planning and interventions should be child-centred, particularly when the child has been abused by a family member.

Comments from Strategy Group Discussions

° agreed that treatment for victims and offenders should be provided not only at point of disclosure but also before that, when potential victim and offender may be perceived to be "at risk" or before disclosure stage is reached

° major point is that the victim is in no way at no time either responsible or accountable

° self-help and mutual aid is important in the long-term as a client-driven way of dealing with the problem

° need for Special Advisor to make a premiere statement that we (workshop participants) demand that the federal government accept child sexual abuse as a priority and require an action commitment and statement to that effect

° a national NGO umbrella foundation/institute should be established

to promcte training, consultation, research, fund-raising and development of standards and networking/also establish complementary regional training resources, e.g. Winnipeg for DNA typing, aboriginal training, etc.

° support as well as treatment must be emphasized and includes home care support, transportation, economic assistance, translation services, child care, housing, etc.

° while there can be a therapeutic by-product of the investigative process, the different goals of therapy and investigation must be emphasized and maintained

° still a need to fully debate/discuss different theoretical approaches, e.g. child vs. family-focused (systems) approach

° while offender must be held solely accountable for his individual acts, there is also a need to hold society accountable in a global sense for its perpetuation of values and conditions which allow the sexual abuse of children to continue to thrive

° not all offenders are "solely" accountable, e.g. adolescent offender who learned his behaviour when he was abused by an adult in his life

° child-centred and family-centred treatment are not necessarily mutually exclusive and can be seen on a continuum with the interests of the child being paramount

° treatment should not be mystified; train people to work with others, particularly in remote and rural areas-- a sympathetic ear is always helpful

° stress federal responsibility for aboriginal and Metis funding; also approach corporate and NGO sectors for general funding

° high-profile people need to come forward with disclosures, e.g. Nancy Reagan and mastectomies

° national clearinghouse on treatment models , efficacy and clinical standards of practice is required

° there must be native autonomy over allocation and use of resources; this requires both structural and jurisdictional change

° offender treatment services must work closely with the criminal justice system; there should be much more exchange of information, cooperation and communication

° rigorous evaluation of treatment models must be undertaken and results disseminated

° growing concern with adolescent offenders; poor fit with existing system

° need for dramatic improvements in the criminal justice system's speed of response due to the negative consequences for treatment

° just as opportunities for treatment begin at, and sometimes prior to disclosure, there is also a responsibility to create opportunities for disclosure, e.g. treatment personnel and prevention specialists must work closely

° the incidence of atypical, bizarre, sensational abuse, e.g. satanic ritual, cannot take so much attention that it detracts from attending to the needs of the larger percentage of victims who are abused in a less dramatic but vastly more common fashion

° the use of the word "treatment" takes too much of its meaning from the medical model; perhaps "healing" is a more useful term

° there is limited recognition of the wide variety of "helpers-therapists-healers" that already exists; too much of an emphasis on specialization may mean that we don't make best use of all the resources available to us

° gender specificity should be reintroduced to all assumptions/ principles/objectives

° the self-help model developed by the feminist movement has been both trivialized and exploited as a means of providing treatment for victims rather than additional forms of treatment being developed and paid for by government

° the prevalence of homophobia means that adults who pose no risk to children are often automatically indicted as being abusers due to their sexual orientation

° be aware of needs of older adults who disclose late in life, often to their doctor who may be unaware of support services

° population with particular needs includes adolescent females and males who are incarcerated or in conflict with the law

° gear training toward caregivers most likely to hear initial disclosure; response to disclosure will dramatically influence the entire course of treatment and healing

° be aware of the need to acknowledge our spirituality in decision-making as well as in providing treatment and support, and the need to develop a healing milieu or environment

Suggested amendments:

° Opportunities for treatment can begin prior to formal disclosure and should be a component...

° The sexual abuse of a child is a criminal act for which the victim, regardless of relationship with the offender, is never accountable...

° To reflect the safety and recovery of the child victim as its continuing priority, community response should incorporate into its treatment planning the assumption that the child should remain in the family home in every situation where that is safe and supportive and, when this is possible, emotional and financial supports should be directed toward the family home.

Suggested additions:

° Every victim of child sexual abuse, regardless of age at the time of disclosure, shall have the right to receive a full range of treatment services, notwithstanding involvement of the criminal justice system.

° All professionals likely to be in contact with adult survivors of childhood sexual abuse have a professional obligation to inform themselves as to the possible manifestations so that disclosure, reporting and appropriate referral can be encouraged.

° Although child sexual abuse cases present themselves in all service areas, it is recognized that they require specialized assessment and treatment skills.

° All child sexual abuse treatment programs must also address social, political and economic issues including, for example, the institutionalized poverty of women and children.

° The disclosure of child sexual abuse within a family should not be permitted to penalize the non-offending parent and siblings; the provision of economic and educational resources are necessary to break the abusive cycle.

° Treatment must include not only therapeutic issues but must also recognize the social and economic conditions that are a consequence of disclosure or a barrier to disclosure and the redress of these conditions, including financial support, housing, social services, etc., must be part of the support services made available.

° Child sexual abuse does not simply equate to intra-familial abuse but also includes extra-familial. Therefore any response needs to incorporate both types of abuse against children.

° The proliferation of child sexual abuse is an indication of a sick society. The proliferation of ritual abuse is reflective of a culture and society where there has been spiritual disintegration. The native culture can teach us about their view of the spiritual and physical self.

° It must be acknowledged that society's values and cultural mores promote adolescent sexual offending and young sexual offenders are most likely also victims of abuse.

° All community and professional response must be both developmentally and culturally appropriate.

° The pervasive nature of child sexual abuse has created and continues to create a major Canadian mental health problem in the adult survivor population which needs to be acknowledged as legitimate and addressed with adequate, consumer-led counselling and support services.

B. STRATEGIC OBJECTIVES

The following summary of strategy group discussions of the 23 strategic objectives presented for review will group certain thematically similar objectives in order to simplify the reporting process and make best use of the notes prepared by the strategy group facilitators.

Service Development

1. Develop treatment and support services for all children who have been sexually abused, whether by a family member, other known individual or stranger. (Groups 1, 7, 10, 11)

2. Include services for adult survivors of child sexual abuse within the scope of community services developed to respond to sexual abuse, regardless of when disclosure occurs. (Groups 2, 5)

3. Develop a comprehensive range of treatment programs for adult offenders, ranging from community-based to institution-based, with mechanisms for continuity, monitoring and follow-up. (Groups 7, 11)

4. Develop comprehensive treatment services for adolescent offenders, with particular emphasis upon prevention and early identification strategies, within both the community and institutions. (Groups 4, 7, 8, 11)

5. Develop and/or adapt treatment programs for sexually abused children with special needs, e.g. very young children, children in alternate care arrangements, aboriginal children, new immigrant children and children with disabilities. Groups 6, 12)

6. Involve family members or other significant individuals, not only at the assessment stage but throughout the treatment process to encourage them to provide appropriate and guided support to the child victim, offender and/or adult survivor. (Group 4)

7. Adapt treatment methodologies and programs to respond to the variety of circumstances in which sexual abuse is committed, e.g. single victim/offender, multiple victims/single offender, multiple victims/multiple offenders, single victim/multiple offenders.

8. Create models for delivery of treatment services which are appropriate for different types of communities, e.g. rural, urban, remote, ethnic. (Groups 5, 6, 10)

° services must be developed and funded and provided in a context of community and socio-economic support, including practical strategies to extend treatment and support networks to cover the whole

living situation of victims and families

° treatment for victims and offenders are both priorities and should not be addressed as dichotomies, e.g. 50% of offenders were once victims, adolescents are both victims and offenders and all victims are potential future victims or, in the minority of cases, offenders

° services for "special needs" populations are critically needed but must be developed in conjunction with the equally urgent need for services to the general population of victims and offenders

° the Special Advisor should call for additional input from special interest groups (e.g. disabled, immigrants, ESL, natives, people in prison, children in care, street kids, the church and the military) regarding how to make services physically and psychologically accessible

° native jurisdictional and service issues are complicated by problems within native communities themselves, e.g. male chiefs are sometimes denying the problem and may even be the abusers; patriarchal organization and feuds/competition between native groups can also impede service development

° street kids are not being served at all and includes sexually abused children, child prostitutes, runaways, 'throw-away' kids/ perhaps federal government should take practical and political lead as it did with missing children

° native and immigrant women's groups and individual women have great potential both as service providers and as "gate-keepers" to facilitate disclosures and access to victims

° impressed with method of handling cases in NWT with the idea of "healing": encourages acceptance of guilt and responsibility by the offender and offers therapy to both victim and offender

° alcohol/drugs are a frequent co-factor and should be considered in all program development

° more healing; less treatment

° direct funds and develop services in sexual assault centres and transition houses where many adult survivors are likely to surface

° important to develop and use local community resources for treatment; "fly-ins" should be used only for training/consultation

° expand use of "Put the Child First" program (CCCY special project)/ develop materials and train trainers to educate volunteers/ identify federal-provincial priority to cooperate in helping rural communities

° the provision of children's social services, in general, and treatment following abuse, in particular, should be seen as a right/ the provincial and territorial governments have the primary responsibility for the application of this right/ the federal government has a responsibility to provide developmental funds for jurisdictions that do not have fully developed social service systems for children/

access to these developmental funds should be contingent upon formal commitments by these jurisdictions to sustaining such services after the developmental phase is completed/ the right to service must include the concept of equal access to service regardless of where one lives in a jurisdiction and must also be culturally appropriate

° offender treatment should be mandated in every instance; offender forfeits his right to refuse treatment as a result of his abuse of a child

° maximum term of probation should be extended to life/ function of probation/parole officers must be reviewed and redefined to include active monitoring of each offender and his treatment/ use delayed sentencing option as one form of monitoring/ extend maximum three year limit in YOA to accommodate long-term treatment needs/ suggest option for young offenders (and adult?) that they could be relieved of probation upon demonstrated "success" in treatment

° offender treatment must be victim-sensitive, e.g. concept of restitution, letter of apology (if desired by victim), payment for own service, in kind or cash

° need to deal with issues of powerlessness and self-control at both individual and community levels

° in cooperation with native/aboriginal peoples, the federal government should develop a Native Child Welfare Act and mental health policy for Treaty Indians and have it in place before the year 2000/ in the interim, funds must be made available to native communities to ensure that they have access to the training and education necessary to deal effectively with child sexual abuse

° provinces should have a commitment to "equalization" of services (similar to the federal commitment to economic equalization) throughout their regional/provincial responsibilities/ stop piloting services in the urban areas and then forgetting to implement them in the rural and remote areas

° make whatever structural and/or jurisdictional changes are required in order to provide native autonomy over their allocated resources

Coordination, Consultation & Training

9. Develop strategies to encourage and support the development of treatment providers who specialize in the treatment of child sexual abuse and have the training and experience in multi-disciplinary teamwork, knowledge of child development and capacity, comprehensive understanding of the dynamics and consequences of child sexual abuse, and an understanding of and comfort in dealing with the criminal justice system.

10. Develop minimum standards and procedural protocols for the provision and coordination of treatment services, ensuring that these are integrated with and complementary to standards and practices related to investigation and legal case management. (Group 6)

11. Coordinate legal and treatment planning to facilitate agreements regarding shared concerns, e.g. court-mandated treatment and/or supervision, contact between victim and offender, family reconciliation or other custody/access issues, court disposition and sentencing, preparing the child for court. (Groups 4, 6)

12. Ensure that both expertise and time required for multi-system/disciplinary consultation and coordination is legitimized and supported in both case management and resource planning. (Group 3)

17. Develop strategies for community outreach and education aimed at demonstrating the critical role which the community plays in recognizing and reporting suspected sexual abuse of a child and in the support and recovery of children and others affected. (Groups 1, 3)

18. Create roles for and encourage involvement of volunteers and lay practitioners, particularly survivors and non-offending family members, in the planning and delivery of support services. (Groups 3, 4, 5)

19. Develop mechanisms for treatment providers to share their knowledge and experiences with investigators and other involved personnel to encourage greater understanding of the dynamics precipitated by the sexual abuse and its disclosure and to provide practical suggestions for minimizing further trauma while still fulfilling the requirements of investigation and legal intervention. (Groups 3, 4)

20. Develop procedural agreements between investigative, medical and treatment personnel regarding the timing and nature of medical assessments or other interventions and their role in both legal and treatment planning. (Group 6)

21. Encourage professional schools to develop models for inter-disciplinary education and, through curriculum development and options for specialization, acknowledge child sexual abuse as an area requiring specialized knowledge and training. (Groups 4, 6, 9)

22. Develop models and curricula for multi-disciplinary training of professionals at both the generalist and specialist levels, as an on-going part of their in-service and/or continuing professional education. (Groups 3, 4, 6, 9)

23. Develop opportunities and incentives for networking among the various therapeutic professions potentially involved in one or more aspects of child sexual abuse treatment, e.g. social workers, psychologists, psychiatrists, pediatricians, nurses. (Groups 3, 4)

° these issues cut across jurisdictional and political boundaries and it is the responsibility of the federal government, through Health & Welfare, to ensure that necessary strategies and programs do not fail simply because no jurisdiction wants to "own" it

° federal and provincial levels must set standards for both services and training and then back those standards up with the resources required to meet them

° important to identify the level of training required to perform different types of services, e.g. there are too few resources to waste highly qualified personnel and there are many support functions which can be performed as well or better by less-skilled persons

° federal political will can only be demonstrated by continued support of the position of Special Advisor who , through continued negotiation and processing, can get and keep the federal and provincial levels "rowing in the same direction"

° national forums/working sessions(like the national strategy workshop) are of great benefit to those working in the field and should occur on a regular bi-annual basis to promote face-to-face information-sharing as well as to rekindle the fire in those who may be burning low

° there must be inter-departmental/ministry/agency committees formed at the federal/provincial-territorial/community levels and there must be formal mechanisms for linking each level: continued national profile of Special Advisor or equivalent could facilitate these connections

° avoid "creeping medicalization" of treatment; standard development must recognize that experts primarily exist in non-medical settings, e.g. community-based agencies, sexual assault centres, etc.

° universities must be encouraged to fulfil their role re training and consultation, e.g. could offer staff appointments, outreach programs (service to community and training for students), research and evaluation (based upon community-identified needs)

° federal government must convene and work with or through primary professional bodies/associations to encourage standard and curricula development to facilitate some minimum uniformity and accessibility to services and professional training across the country

° treatment planning must be coordinated at the local level via designated inter-agency/system case manager or child advocate / community protocols must specify who will do this

° critical need for continued opportunities to exchange information and collaborate on both provincial and national level/ this is a new and rapidly growing/shifting field

° strong plea for continuation of the role of the Special Advisor and an expanded, more relevant role for the Family Violence Division's Clearinghouse (why was Vis à Vis given away? It no longer represents a relevant voice for children)

° establish an inter-ministerial, inter-provincial Deputy Ministers Committee to meet on a quarterly basis to discuss developments and set goals in the area of child sexual abuse

° in order to ensure children's right to services and promote the general interests of children within federal jurisdictions, a child advocacy body should be established as a federal institution, independant of any particular department due to the inter-departmental nature of the question

° Health & Welfare has a leadership role which it ought to pursue more aggressively in breaking down the barriers, ending the "buck-passing" and clearing the jurisdictional confusion which now exists

° each provincial government should create an Office for Children or Children's Ombudsman to assume leadership role in policy development, interministerial issues, federal and inter-provincial liaison and advocacy

° federal and/or provincial government in cooperation with professional associations should support the creation of certificate programs at the college and university level in child sexual abuse treatment and child victim-witness preparation and support/ also create post-graduate level courses within various university degree programs (perhaps interdisciplinary in focus and audience)

° ensure that all federal government personnel with responsibilities for policy development and/or project supervision and/or funding recommendations receive in-service training on current issues in the child sexual abuse field/ training team should be created with expert trainers/practitioners from across the country/ also creates opportunity for round-table policy consultation

° provide same training outlined above for provincial government officials

° federal and provincial solicitors-general must ensure through whatever means are available that all police offficers receive an introductory minimum of two days basic training (preferably with child protection colleagues) in child sexual abuse dynamics, child development and investigation techniques

° each province should appoint a team of experts to act as consultants, providing support services and consultation by phone or in person anywhere in the province upon request, e.g. consultation on planning/response in high profile cases/ these consultants would retain their full-time responsibilities and act only when called upon

Research and Evaluation

14. Develop mechanisms for consultation and exchange of information between and among local/regional, provincial/territorial, and federal/national structures to promote informed treatment planning, research and program evaluation. (Groups 2, 4, 6, 9)

15. Develop and coordinate research to identify the efficacy of different treatment models and the external variables which may help or hinder treatment results, e.g. age and gender of victim, relationship of offender to victim, family and systems' response to disclosure, impact of legal proceedings, gender and/or philosophy of treatment provider. (Groups 3, 4, 9)

16. Develop mechanisms to clarify and assess the impact of continuing disagreements regarding the origin and precipitating causes of child sexual abuse (e.g. a sexual vs. psychological vs. social vs. family dysfunction), particularly as they may affect the choice and outcome of treatment.

° requirements for research and evaluation must accompany all program and service grants/ suggestion that certain percentage (20%) of all dollars be earmarked for this purpose

° all research, evaluation and service planning should make provision for direct input from children

° national institute needed to profile need for research, develop appropriate tools and methodologies, provide consultation, recommend priorities and disseminate findings

° research/evaluation funds should be targeted at programs with proven track records which have not yet been fully researched; then several of the "best" models should be adapted for testing in different parts of the country

° federal level must assume greater responsibility for ensuring equitable service development and the provision of consultation and research dollars across the country, regardless of the lack of political will in particular provinces

° undertake research to determine prevalence of child sexual abuse histories among psychiatric clients and among those using services of other social services such as drug/alcohol treatment centres, etc.

° critical need for comprehensive national plan to evaluate treatment modalities

° funding required to implement and research treatment and support services developed by natives for native children and adults, both on and off reserves, e.g. what is the role and impact of native elders in this area?

° undertake research regarding the prevalence of sexual abuse by care-givers and professionals, leading to the development of a code of ethics identifying sexual abuse as unacceptable and grounds for dismissal and/or other disciplinary action

Funding

13. Identify all potential funding arrangements for child sexual abuse treatment services (e.g. the Uniform Mental Health Act, the Canada Assistance Plan, private and public health plans) and develop a plan to maximize use of resources to ensure availability of and accessibility to services throughout the country. (Groups 3, 4, 9, 12)

° native communities and individual natives go unserved because of jurisdictional arguments (federal or provincial; native affairs, social services or health; reserve vs. non-reserve)/ medical services for natives do not include children's mental health services which are currently being drawn from an "uninsured services" fund which is very limited/ fund natives to develop services for natives

° need to increase flexibility of CAP and encourage partnerships at all levels of government and with the private sector to establish common goals and encourage pooling of financial resources

° public and private health care plans must be "demedicalized" if we are to avoid the American experience where children must be hospitalized in order to qualify for treatment services/ social workers and other mental health practitioners must be covered for community-based, non-medical therapeutic counselling services

° encourage community-based funding sources to recognize child sexual abuse services as within their realm to support, e.g. some United Ways consider all children's services, particularly for abused children, the sole responsibility of government

° survey provinces to determine availability of criminal injury compensation for victims of child sexual abuse/ encourage maximum awards to cover costs of treatment/ also encourage court awarded damages in civil cases to cover costs of treatment and consider allocation of criminal fines levied against convicted offenders to a fund for the development of treatment services for victims

° establish minimal tarrifs under medical plans to cover costs of professionals who have developed expertise in child sexual abuse to travel to distant areas to train front-line workers

° determine whether CAP arrangements can be revised to a cost-sharing basis (dollar-for-dollar) rather than block funding

° encourage federal commitment to long-term cost-sharing for treatment services with dollars earmarked every five years

° access funds through Boards created to manage Bill 89 surcharge to child victims

° services should be cost-shared (federal-provincial) with the federal government paying anywhere from 25-75% of the costs, depending upon need

C. RECOMMENDATIONS FROM THEMATIC ISSUE GROUP ON TREATMENT & SUPPORT

1. General Points to be Emphasized

° cultural context of child sexual abuse, socio-economic, media exploitation, patriarchy

° urgency of issue and need for government to respond now

° support for the continuing role of Special Advisor

2. Education

° affirmative action in professional education

° development of material for lay persons, culturally sensitive

° a/v materials for those who can't read

° personnel practices needed for private sector

° inter-disciplinary training

° codes of ethics for professionals must deal with exploitation of clients

° support for front-line workers, foster parents, child care workers

3. Funding

° provincial-federal funding agreements must be used more creatively

° inadequacy of present levels demands addressing to make services available

° alternatives to government funding, e.g. service groups, churches, business

° financial resources for women/children in crisis situations for housing, food; possible role for churches

4. Jurisdictional Issues

° extend probation to life, if necessary

° delayed sentencing

° funding for parent to sue in civil court to get custody or access

° legislation to deal with delays in court system for child sexual abuse cases

5. Special Needs Groups

° mentally disabled offenders

° disabled children

° children in care

° juvenile prostitutes/runaways (need for safe houses)

° gay and lesbian youth

° children involved in custody and access cases

° very young children

6. Evaluation

° there was very strong support for giving priority to evaluation/ outcome studies; cost-benefit analysis of not treating

° findings must be widely distributed

7. Native Issues

° imbalance in numbers of programs for offenders vs. victims in the NWT: there are more resources for offenders

° interdisciplinary

° training for trainers, self-help groups, crisis lines, child advocates in court

° substance abuse counselling is needed as part of child sexual abuse treatment

8. Child Protection System Issues

° strengthen through federal-provincial initiatives

° reinforce role of child welfare or child advocacy

° investigative and child welfare roles are not mutually exclusive

° child welfare is being forced into a policing role

° lack of consistency in the treatment of intra- vs. extra-familial cases

9. Medical Field

° lack of trained physicians; work through the Canadian College of Physicians and Surgeons and Canadian Pediatric Society to increase knowledge and encourage child-centred approach

° need for psychiatrists to be trained in area of child sexual abuse

10. Treatment Interventions

° developmentally and age-appropriate treatment needed

° do not allow government to over-rely on self-help models and group

programs simply because they are cheaper; intensive, long-term therapy also needed in many cases

° need accesible services for adult survivors

11. Feminist Concerns

° women's groups are not often equated as self-help resources

° gender-specific treatment is needed

° mother needs to be made visible as the entry point for treating children in intra-familial cases

12. Offenders

° very few programs in custodial settings

° need continuum of services with follow-up community-based services

° legislation to require treatment as a condition of parole; longer probation provisions with provision to incarcerate, based upon compulsive and chronic nature of the offence/ also change YOA

° concern that extra-familial adult offenders are not seen as being in need of treatment, only incarceration

° need to consider alternatives to incarceration

13. Definitional Issues

° child sexual abuse is not just a "family violence" issue; need to ensure response to and treatment for both intra- and extra-familial cases

14. Implementation of Report

° MPs should be asked to go to their constituents to get a sense of the needs in this area in their communities

15. Priorities

° more services/resources for victims

° more services/resources for offenders (both adult and adolescent)

° more services/resources for treatment providers (training programs)

° more resources for research and evaluation

° more resources for central information bank

° all initiatives must be inter-jurisdictional and multi-disciplinary

° native/aboriginal issues

° federal government must take leadership role and direct funds for direct services/ provinces and municipalities must contribute start-up administrative costs in their jurisdictions

IV. NATIVE/ABORIGINAL ISSUES

A. RECOMMENDATIONS FROM THEMATIC ISSUE GROUP ON NATIVE/ABORIGINAL ISSUES

If professionals want to help the Native People, they have to be prepared to learn from them. They cannot help unless they understand Native values and culture.

The Government should make contact with the Metis and Indian Associations in each province. In each province there is a special advisor on Native issues sponsored by these associations and these are the people who should be used as contacts to reach out to the Native community. These special advisors are in Social Services and the Solicitor-General.

There is a need to work very closely with all government agencies and bodies in the area of child sexual abuse. Available expertise must be used, whether it is native or non-native. There must be direct communication between government bodies and Indian and Metis Associations. The use of various consultants acts as a barrier and an unnecessary filter. Indian and Metis Associations are the elected representatives and speak for their people.

Elders are the Indian experts in the area of the family. Councils of Elders should be consulted and were conspicuous by their absence at the workshop.

It is recommended:

1. That there be a national forum on child sexual abuse for Aboriginal Peoples

2. That non-native people with expertise in the area of child sexual abuse take part in this national forum

3. That a planning committee be formed to plan this national forum

4. That a working committee be set up to take the recommendations and build on them in preparation for this national forum

5. That to review and build on the recommendations be a specific agenda item.

B. OUTSTANDING CONCERNS FROM NWT/YUKON GEOGRAPHIC GROUP MEETING

° "Gender laundering" in the four discussion papers distances people from considering how women and children are treated by society and its systems.

° Danger that relying on specialists and specialized training may exclude valuable community resources, particularly elders. Also means difficulty in the North where there are no specialists. Suggestion that someone from "Four Worlds" should have been invited.

° No representation from adult and adolescent survivors who have information which nobody else has.

° Put monies to practical use rather than establishing another department, advisory board, commission, etc.